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CONFIRMATION NO. 1275

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/791,008 | <b>FILING OR 371(c) DATE</b><br>03/02/2004<br><b>RULE</b> | <b>CLASS</b><br>606 | <b>GROUP ART UNIT</b><br>3763 | <b>ATTORNEY DOCKET NO.</b><br>1001.1765101 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/24/2004

|  |                        |                     |                    |                         |
|--|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>4 | TOTAL CLAIMS<br>25 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                     |                    |                         |
| Verified and Acknowledged<br>Examiner's Signature: <i>Paul Smith</i> Initials: <i>PBS</i>  |                        |                     |                    |                         |

## ADDRESS

28075

## TITLE

Occlusion balloon catheter with external inflation lumen

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|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>860 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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